R430-50-22. REST AND SLEEP.

This section explains the rules regarding children's rest and sleep in a child care program. The section also explains the rules that apply to sleeping equipment used by children in care. This includes sleeping equipment that is used during child care hours by the provider's and caregivers' own children younger than 4 years old.

Rest and Sleep

(1) The provider shall offer children in care a daily opportunity for rest or sleep in an environment with subdued lighting, a low noise level, and freedom from distractions.

center

Rationale/Explanation

Studies suggest that sleep is essential for the optimal health and growth of children. <u>The Centers</u> for Disease Control and Prevention (CDC) makes the following recommendations.

Age Group	Recommended Hours of Sleep Per Day
Newborn: 0-3 months	14-17 hours
Infant: 4-12 months	12-16 hours
Toddlers: 1-2 years	11-14 hours
Preschool: 3-5 years	10-13 hours
School Age: 6-12 years	9-12 hours
Teen: 13-18 years	8-10 hours

Conditions conducive to sleep and rest for younger children include a consistent caregiver, a routine quiet place, regular times for rest, and use of routines and safe practices. Most preschool-aged children in all-day care benefit from scheduled periods of rest. This rest may take the form of actual napping, a quiet time, or a change of pace between activities. The times and duration of naps will affect behavior at home. CFOC 4th ed. Standard 3.1.4.4 p.p. 106.

According to the CDC, children who do not get enough sleep are more likely to:



- Be overweight.
- Not get enough physical activity.
- Suffer from depressive symptoms.
- Engage in unhealthy risk behaviors such as drinking alcohol.
- Perform poorly in school.

Compliance Guidelines

Children who do not nap must be given an opportunity to rest by doing a quiet activity such as reading, coloring, puzzles, mindfulness or another calm activity during the day.

Risk Level

Low

Corrective Action for 1st Instance

Warning

- (2) The provider shall ensure that each crib:
 - (a) has a tight-fitting mattress;
 - (b) has slats spaced no more than 2-3/8 inches apart;
 - (c) has at least 20 inches from the top of the mattress to the top of the crib rail, or at least 12 inches from the top of the mattress to the top of the crib rail if the child using the crib cannot sit up without assistance;
 - (d) does not have strings, cords, ropes, or other entanglement hazards on the crib or within reach of the child; and
 - (e) has documentation from the manufacturer or retailer stating that the crib was built after June 28, 2011, or that the crib is certified if the crib was manufactured before that date.

Rationale/Explanation

Caregivers/teachers should never use strings to hang any object, such as a mobile, or a toy or a diaper bag, on or near the crib where a child could become caught in it and strangle. Infant monitors and their cords and other electrical cords should never be placed in the crib or sleeping equipment. Crib mattresses should fit snugly and be made specifically for the size crib in which they are placed. Infants should not be placed on an inflatable mattress due to potential of entrapment or suffocation CFOC 4th ed. Standard 5.4.5.1 p.p. 270.

More infants die every year in incidents involving cribs than with any other nursery product. Standards have been developed to define crib safety, and providers should make sure that cribs used in the facility meet these standards to protect children and prevent injuries or death. Significant changes to the ATSM and CPSC standards for cribs took effect as of June 28, 2011.



For information about CPSC recommendations visit "<u>Safe Sleep - Cribs and Infants Products</u> <u>Information Center</u>".

Compliance Guidelines

Tight-fitting mattress

- To determine if a crib has a tight-fitting mattress
 - Move the mattress to one corner of the crib and as close as possible to the head or foot of the crib.
 - If this creates a gap between the mattress and any side of the crib, place a choke tube (or if unavailable, two adult fingers together) vertically at the widest point of each gap. If the tube fits entirely between the crib side and the mattress, the mattress is not tight fitting.
- A firm material such as wood may be added to a crib frame to create a tight-fitting mattress, as long as the material is flush with the top of the mattress.
- It is a rule violation if any item such as a blanket, eggshell mattress, or foam is wedged in between the mattress and the crib frame.
- This rule applies only to cribs, not to bassinets, porta-cribs, or playpens.

Height of crib rail from mattress

- The rule is out of compliance if:
 - One end of a mattress is propped up making the distance between that end of the mattress and the top of the crib railing less than 20 inches.
 - A hinged crib side is folded down and not in the up position resulting in a measurement that is less than 20 inches from the mattress to the top of the crib side. It is out of compliance even if a caregiver is next to the crib.

Entanglement Hazards

- No strings, cords, ropes, or other entanglement or strangulation hazards must be on or in the crib, or within 36 inches of any part of the crib.
- It is a rule violation if any strings or cords are longer than 8 inches and are in or on the sleeping equipment, or within 36 inches from the surface of the sleeping equipment. This includes pacifier cords, mobiles hanging over a crib, and electrical cords that might be on furniture or the floor next to the crib.

Manufacturing Date

- To ensure the crib was built after June 28, 2011:
 - Look at the manufacturing date on the crib or the registration form that may have been supplied when the crib was purchased.
 - The manufacturing date can be found usually on the board that holds the mattress or on the lower part of the crib frame.
 - A purchase receipt is not adequate documentation.



- Confirm that the label or form shows the crib was manufactured on or after June 28, 2011.
- Verify that the crib is not on the CPSC Recall List.
- If a provider believes the crib meets federal standards but does not have a manufacturing date or registration form, the provider may:
 - Contact the manufacturer or retailer and ask for documentation that the crib is in compliance with 16 CFR Part 1219 or 16 CFR Part 1220.
 - Submit the documentation to CCL before using the crib to sleep children in care.

Risk Level

Moderate

Corrective Action for 1st Instance

Citation Warning

(3) The provider shall ensure that sleeping equipment does not block exits.

Rationale/Explanation

Unobstructed access to exits is essential to prompt evacuation. CFOC 4th ed. Standard 5.1.4.3 p.p. 220.

Compliance Guidelines

- Sleeping equipment may be placed in front of a door or opening to a room, as long as there is at least one other doorway from the room that is not blocked and could be used in an emergency.
- Sleeping equipment may not block exits even when it is low and can be stepped over.
- Sleeping equipment must be far enough away from a door that if the door were to open inward, there would be enough clearance for the door to fully open (or swing 180 degrees).

Risk Level

Moderate

Corrective Action for 1st Instance

Citation Warning

- (4) The provider shall ensure that sleeping equipment and bedding items are:
 - (a) clearly assigned to one child; and
 - (b) laundered as needed, but at least once a week, and before use by another child.

Rationale/Explanation

No child should sleep on a bare, uncovered surface. Seasonally appropriate covering, such as sheets, sleep garments, or blankets that are sufficient to maintain adequate warmth, should be



available and should be used by each child below school-age. Pillows, blankets, and sleep positioners should not be used with infants. If pillows are used by toddlers and older children, pillows should have removable cases that can be laundered, be assigned to a child, and used by that child only while s/he is enrolled in the facility. (Pillows are not required for older children.) Each child's pillow, blanket, sheet, and any special sleep item should be stored separately from those of other children. CFOC 4th ed. Standard 5.4.5.1 p.p. 268-269.

Scabies and ringworm are diseases transmitted by direct person-to-person contact. For example, ringworm is transmitted by the sharing of personal articles such as combs, brushes, towels, clothing, and bedding. Prohibiting the sharing of personal articles helps prevent the spread of diseases. CFOC 4th ed. Standard 5.4.5.1 p.p. 269.

Risk Level

Moderate

Corrective Action for 1st Instance

Citation Warning when equipment is not cleaned and sanitized as needed or at least weekly

Risk Level

Low

Corrective Action for 1st Instance

Warning otherwise

(5) The provider shall clean and sanitize sleeping equipment that is not clearly assigned to and used by an individual child before each use.

Rational

Although children freely interact and can contaminate each other while awake, reducing the transmission of infectious disease agents on large airborne droplets during sleep periods will reduce the dose of such agents to which the child is exposed overall. CFOC 4th ed. Standard 5.4.5.1 p.p. 269.

Compliance Guidelines

- When bedding is stored in a bin, bag, or cubby that is labeled with a child's name, it is considered assigned to an individual child.
- Mats or cots may be clearly assigned to one child by labeling with each child's name, by identifying each child's mat or cot with a number or color code, or by labeling the container where the mats or cots are stored.

Risk Level

Moderate



Corrective Action for 1st Instance

Citation Warning

